

Section Three - The Nature and Extent of Homelessness, 2007 Update

Introduction

This section describes the nature and extent of homelessness. It defines homelessness, addresses the scope and characteristics of homeless families and individuals in Seattle/King County, and describes key factors that create and sustain homelessness.

Priority needs are identified along with strategies for ending homelessness in accord with A Roof Over Every Bed in King County, our community's Ten Year Plan to End Homelessness (TYP). The TYP now guides the development of our local Continuum of Care.

Priorities for Serving Homeless Individuals and Families

The TYP provides the focus and roadmap for ending homelessness in Seattle/King County. The effort grew out of the 2002 formation of the Committee to End Homelessness (CEH) representing the vision and collective commitment of homeless and formerly homeless youth and adults, faith communities, philanthropy, business, local governments, nonprofit human services providers, nonprofit housing developers, advocates, and other stakeholders from throughout the county. All were involved in the planning process. The TYP Governing Board began its work in July 2005 and the Interagency Council (IAC) and committees followed, continuing the commitment to public involvement. There is broad representation and participation from throughout the County on the Consumer Advisory Council, Single Adults Committee, Families Committee, Youth and Young Adult Committee, Resource Development and Alignment Committee, Shelter Task Force, and Legislative Advocacy Workgroup.

The TYP focus is to ***end homelessness rather than managing it*** through five strategies: Prevent people from becoming homeless, build or acquire more affordable housing and move people rapidly from homelessness to housing with integrated services, increase the efficiency of the existing system that serves homeless people, build and sustain the public and political will to end homelessness, and measure and report outcomes. The plan also contains specific actions and approaches to preventing and ending homelessness for each of the subpopulations of single adults, families, and youth and young adults. The full Ten Year Plan document can be accessed at <http://cehkc.org/10YPlanPhotos.pdf>.

The TYP is based on six principles that are fundamental to the long-term success of the effort:

- Prevent people from becoming homeless
- Coordinating leadership, fund and program initiatives to end homelessness countywide
- Building and sustaining the political will and community support to end homelessness in the context of increasingly competitive human service needs
- Securing 9,500 units of stable housing for homeless persons
- Delivering flexible services to support stability and independence
- Measuring success and reporting outcomes

Each principle is supported by immediate, intermediate, and long-term activities to advance the primary goal to end homelessness within ten years.

Implementing the TYP in 2007

The TYP Interagency Council developed a workplan for 2006-07 which guides strategy implementation. Initiatives include:

- Establish a plan for moving from a shelter focus to a housing first response
- Reduce the number of individuals exiting jails/health institutions into homelessness via activities like discharge planning from hospitals, the mental health system and detention facilities (closing the “front door” to homelessness)
- Increase housing maintenance strategies including rent assistance and eviction prevention
- Streamline the process of accessing housing and services programs via coordinated intake and reducing duplication of client assessments
- Increase access to housing through acquisition and/or rehabilitation of housing (efforts supported through other HUD, state and municipal development funds such as HOME, the state Housing Trust Fund and Seattle’s Housing Levy), adaptation of transitional housing into long term units where appropriate and increasing the number of landlords willing to rent to currently homeless families and individuals
- Increase and coordinate funding for supported housing projects
- Effectively communicate successful outcomes

The TYP further acknowledges that solutions to homelessness differ among each of the subpopulations of families, single adults, and youth and young adults and recommends quantified goals for housing development specific to each group.

As the data following indicates, the trend continues that a disproportionate number of homeless individuals are people of color. Addressing that disproportionality, and attending to the evolving cultural competency of services working with homeless and at-risk of homeless people, is a critical issue woven through all of the work plans and strategies.

Families

Housing strategies include ensuring that homeless families can access appropriate affordable housing and continuing housing assistance to formerly homeless families after placement in permanent housing. Services recommendations are designed to coordinate and streamline access to services that will support both family and housing stability.

Strategies include those to realign the current system, prevent family homelessness, and add additional resources to rapidly move homeless families into permanent housing (independent, with moderate on-site services, with intensive on-site services) strategies to promote housing and family stability.

Single Adults

Housing models for single adults include subsidized independent apartments, units with moderate services on-site, and units with intensive services on-site, along with community-based services access points and flexible support services.

Youth and Young Adults

Housing and service strategies include the creation of an accessible network of community-based information and human service centers, a range of supportive services to promote success in housing, and development of youth-specific housing models.

Demographic Profile of Homeless People in Seattle/King County

To fully understand the nature and extent of homelessness, it is necessary to realize that people who are homeless or at risk of losing their housing are as varied as the general population. They have different family relationships, backgrounds, ages, ethnicities, and genders. Defining homelessness is not a simple matter.

Our community has used the definition for homelessness included in the Stewart B. McKinney Act of 1994 in order to comply with requirements of various federal funding resources. According to this Act, a person is considered homeless if he/she “lacks a fixed, regular, and adequate night-time residence and has a primary night-time residence that is:

- (A) A supervised publicly or privately operated shelter designed to provide temporary living accommodations,
- (B) An institution that provides a temporary residence for individuals intended to be institutionalized, or
- (C) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.”

A number of newly published reports have defined homelessness with more clarity and in ways that are better suited to the needs of homeless people. By embracing these new definitions, Seattle is joining many like-minded communities across the country by incorporating the following definitions in policies and strategic plans in order to better address gaps in housing and services. These studies have identified three primary categories of homeless people:

Transitionally homeless persons generally have a single episode of homelessness lasting an average of 58 days, although they might be homeless for up to six months. They move quickly through the homeless assistance system, and their principal need is for safe, decent, and affordable housing. Transitionally homeless people are typically working entry-level jobs as well as those, such as seniors, who are on fixed incomes. An increase in rent, loss of a job, or medical emergency could result in the loss of their housing.

Episodically homeless persons have four to five episodes of homelessness and are usually homeless for a short time, on average about 265 days. They may cycle back and forth from being housed to being homeless.

Chronically homeless persons experience a disabling condition and have either been continuously homeless for a year or more or have had at least four episodes of homelessness in the past three years. These individuals often live on the streets or cycle from shelter to shelter. Although much attention has been focused recently on chronically homeless single adults, Seattle is also looking at chronicity patterns of homeless families.

Data Collection Methodology

For people who are on the streets or staying in emergency shelters and transitional housing programs, the primary source of unduplicated data is the annual One Night Count (ONC) of Homeless People in Seattle-King County. The ONC provides a count and demographic data on individuals residing in emergency shelters and transitional housing programs at a point in time but undercounts the unsheltered population and provides poor information on what kind of people are

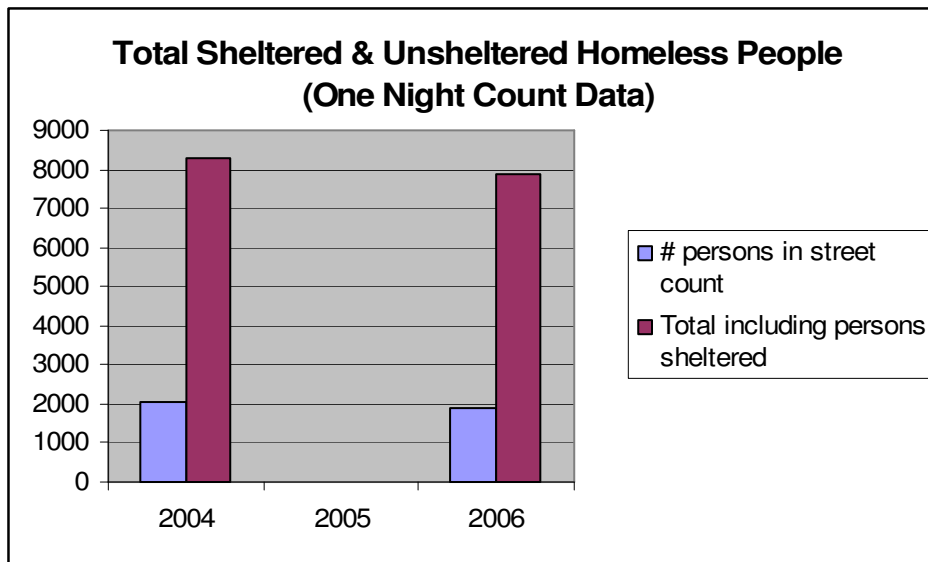
unsheltered. Although methodology is improved every year, this source of data will always paint only a partial picture of Seattle's homeless people. It is, however, the only point-in-time source of data available for all homeless populations.

We continue to review data from numerous sources including reports and evaluations from Healthcare for the Homeless Network, Sound Families, the Crisis Clinic and other local programs, and best practices research from other areas of the country. This data is supportive of the trends documented in the process of developing and adopting the TYP. A limitation of many data sources is that they reflect those who are able to participate in those services. It is difficult, if not impossible, to infer the characteristics of people who may have similar needs but do not access services.

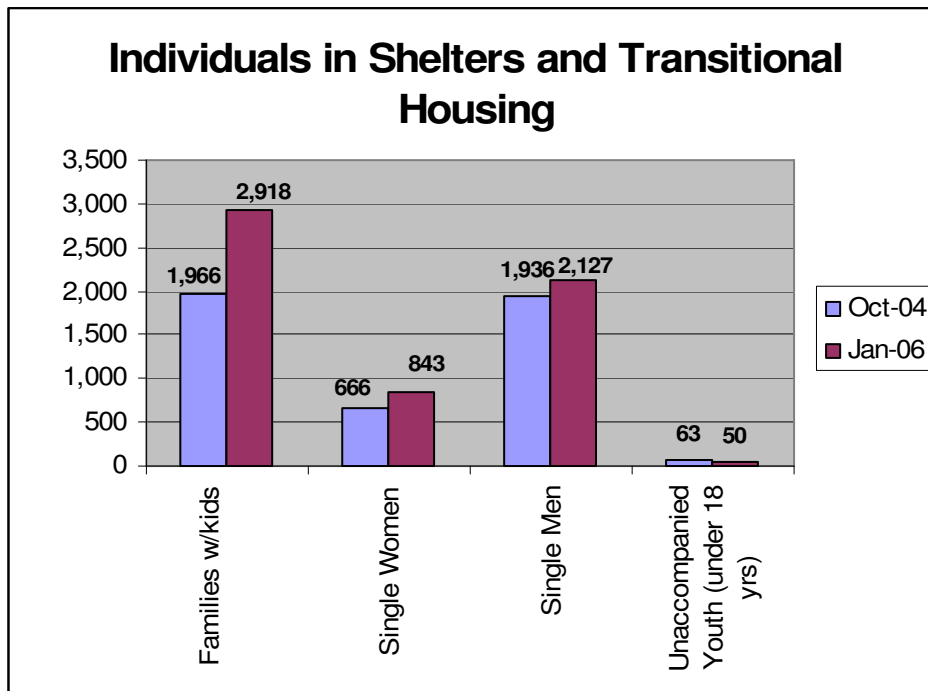
Safe Harbors, our community's Homelessness Management Information System (HMIS), is beginning to collect information about those who receive services in the City of Seattle as well as King County. As coverage increases in this system, we look forward to knowing more about the need for, and use of, housing and services so that we can modify and adjust our services and housing patterns to more effectively address the needs of those who seek assistance from our continuum of care. Safe Harbors currently produces data based on 40% program participation in the (HMIS) system, and it is anticipated that 90% of Seattle/King County homeless service programs will contribute data by June 30, 2007.

The following illustrates the profile of homeless people in Seattle and King County based on the "snapshot" taken primarily through the ONC survey. Similar information from 2004 formed the basis for the strategies included in the TYP:

- In January 2006, the One Night Count of Homeless People found more than 7,900 sheltered and unsheltered individuals homeless in Seattle and King County. Fifty-three percent or 1,697 households were in Seattle. These included single adults, families and unaccompanied youth (under 18 years of age).
- There were 2,463 individuals in emergency shelters and 3,501 individuals in transitional housing programs.
- Families with children numbered 2,918 in shelters and transitional housing, followed by single men numbering 2,127. There were 843 single women, unaccompanied youth under 18 years of age accounted for the remainder at 50 individuals.
- The graphs below compare available October 2004 and January 2006 ONC data (a 2005 count was delayed to correlate with January report deadlines.) **Note:** Federal Way was added as a count area in the 2006 survey. However, comparison of similar ONC areas between 2004 and 2006 shows a 6% decrease in overall numbers of persons counted on the streets and in shelters or transitional housing.

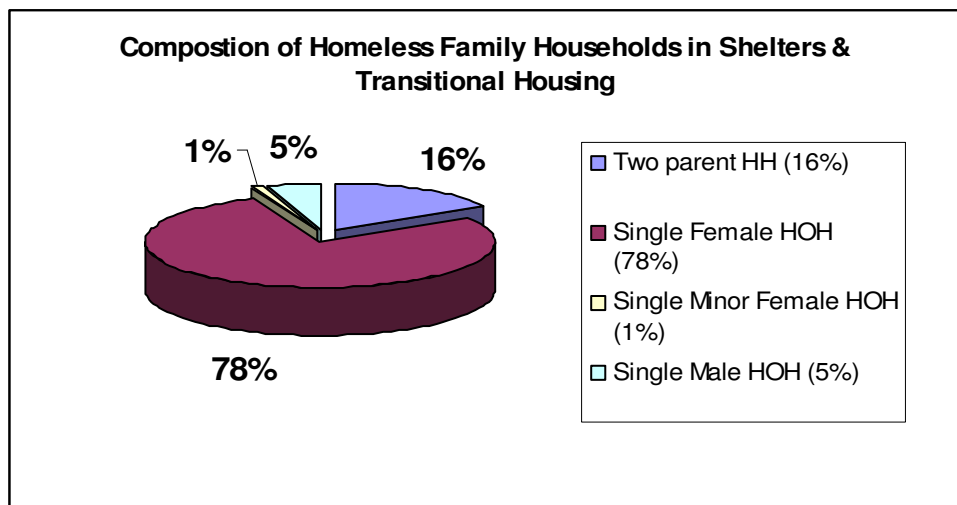


Source: Seattle-King County Coalition for the Homeless, 2004 & 2006



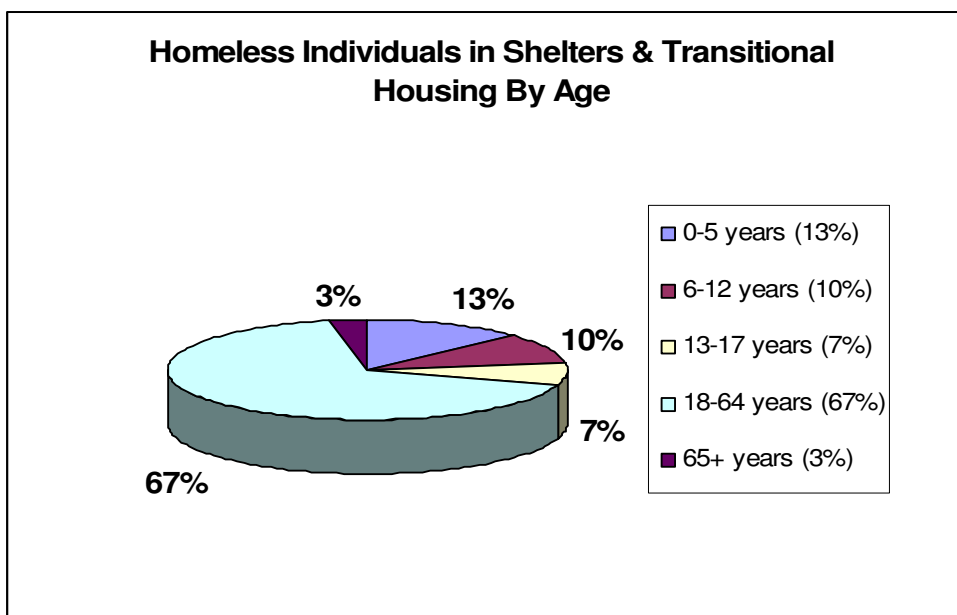
Source: Seattle-King County Coalition for the Homeless, 2004 & 2006

- The majority (2/3's) of all individual adults in shelters and transitional housing were men.
- 3,942 **households** were counted in shelters and transitional housing programs on the night of the survey, which included 809 families (defined as one or more adults with one or more children). The majority of children were with their mother or other female caretaker (78%), some were accompanied by either parents or two caretakers (16%), and a few were with their father or male caretaker (5%).



Source: Seattle-King County Coalition for the Homeless, January 2006

- Thirty percent or 1,749 of the persons in shelters and transitional housing programs are children under the age of 18 years. In these same types of programs, 3%, or 203 people are 65 and older.

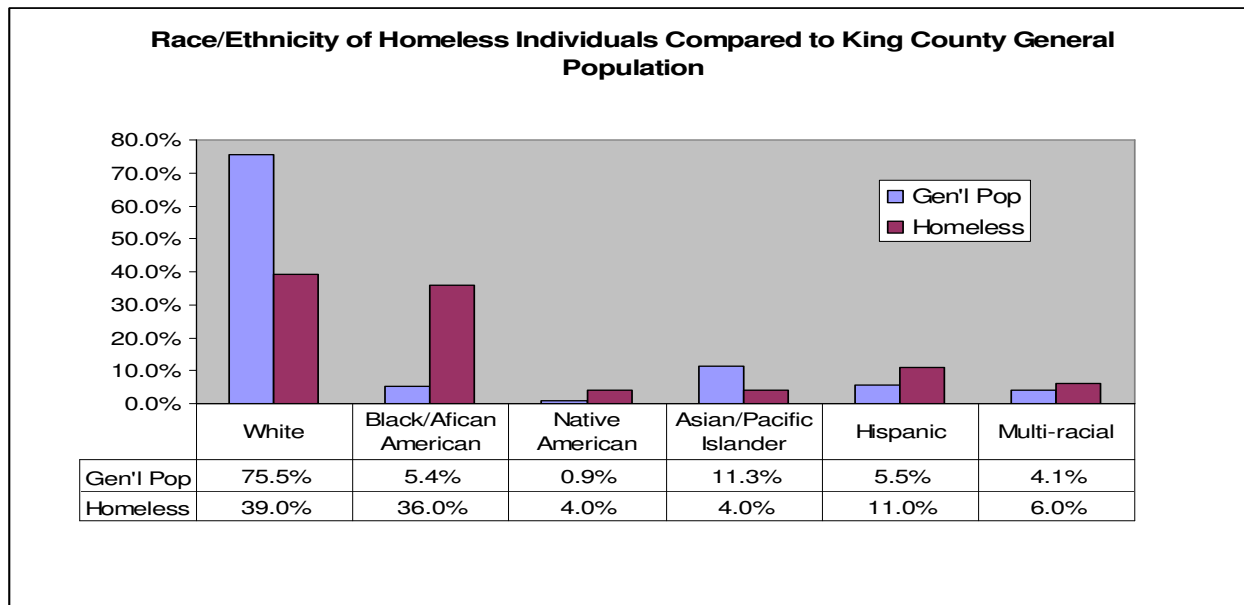


Source: Seattle-King County Coalition for the Homeless, January 2006

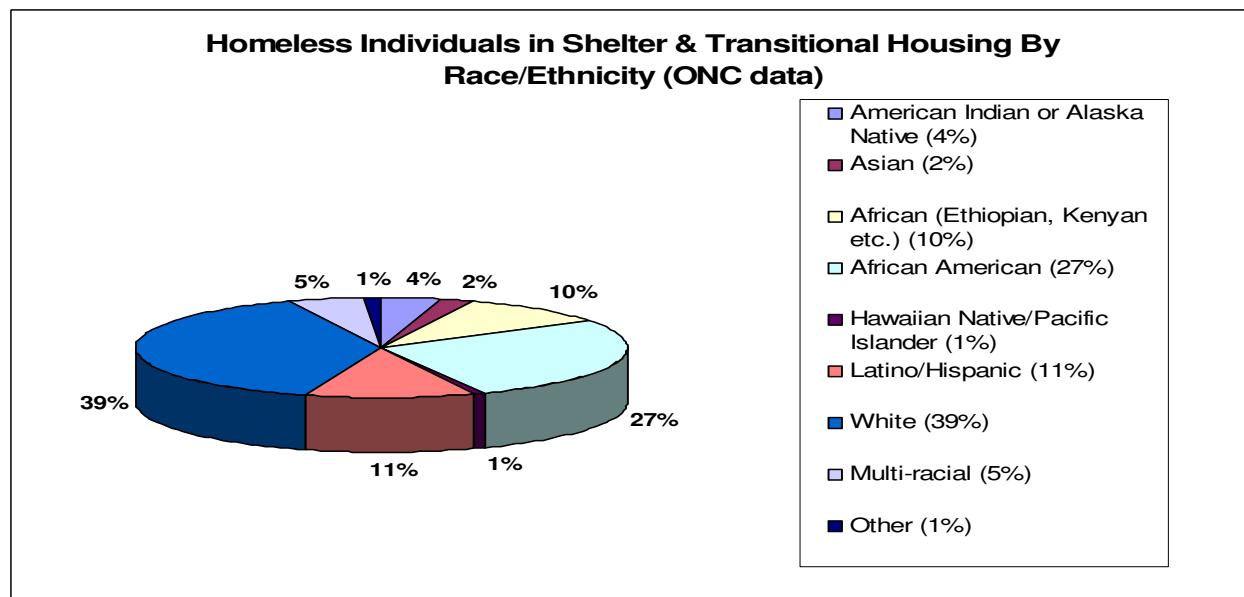
- Racial disparity is very apparent among the homeless population. Although information about race is not collected during the street count, the survey of shelters and transitional housing programs reported that African American, American Indian/Alaska Native, and Hispanic people comprise 51% of the homeless population, whereas in the general populations people of these races make up just 12% of the total adult population in Seattle.

Data from the Health Care for the Homeless Network also shows a disproportionate number of homeless people who are people of color. Of the 8,148 patients served by HCHN who

reported their ethnicity, 54% were people of color – 26% were African American, 9% were American Indian/Alaska Native, 11% were Hispanic/Latino, 4% were Asian/Pacific Islander and 4% were multi-racial. (*HCHN 2005 Annual Report and Data Summary – June 2006*)



Source: 2000 U.S. Census data; available at <http://www.meetrokc.gov/KCCensus/>



Seattle-King County Coalition for the Homeless, January 2006. *Percentages are calculated excluding unknowns.

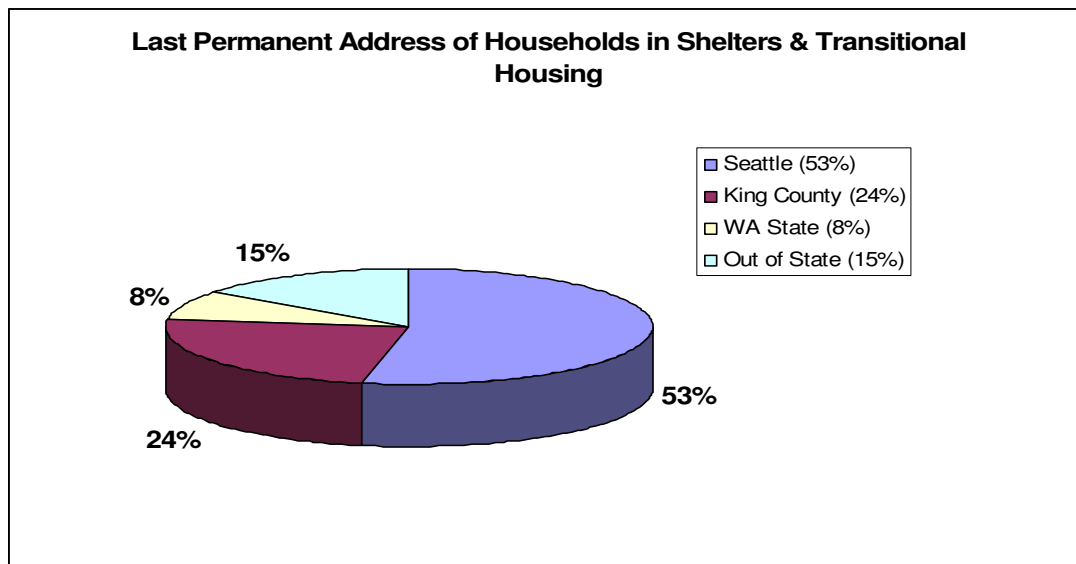
- Shelter and transitional housing providers continue to serve recent arrivals to the U.S., mainly from Africa, especially large families from East Africa. Although Native Americans account for 4% of persons seen by shelters and transitional housing programs, their numbers are believed to be higher among the unsheltered population. Southeast Asian refugees have expressed concerns that shelters do not address their cultural and language needs. As a consequence, many prefer to double up with other Southeast Asian households, often living in very crowded conditions.

- Although immigrants or refugees were found in shelters serving single adults and families, the greatest number were families in transitional housing. Correspondingly, these programs reported many of these individuals and families used another language for their primary means of communication.
- The number of immigrants and refugees being served has nearly doubled since last year's reported data (353 immigrants/refugees and 225 limited English speakers respectively.) However, this increase could be explained by changes in federal refugee admission ceilings, the fact the ONC data included Federal Way in 2006, changes in immigrant and refugee's awareness of homeless services, and/or actual population increases.

Homeless Households in Shelters and Transitional Housing by Immigration Status and Need for Translation Services					
		Single Adults		Families	
	Totals	Shelter	Transitional Housing	Shelter	Transitional Housing
Immigrants/ Refugees	699	14	52	102	531
Limited English Speaking	569	51	39	84	395

Source: Seattle-King County Coalition for the Homeless, January 2006

- Of the 3,198 households who reported a last permanent address in the One Night Count survey, 1,697 or 53% were from Seattle, 758 or 24% were from the balance of King County, 273 or 8% were from other parts of Washington, and 469 or 15% were from other parts of the nation.

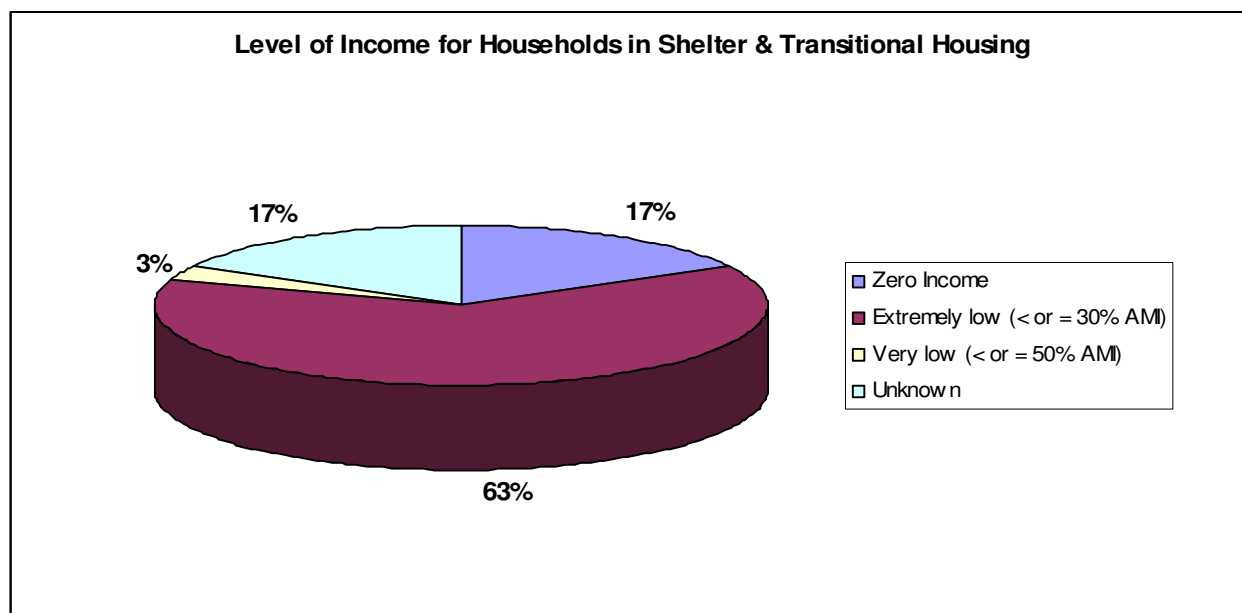


Source: Seattle-King County Coalition for the Homeless, January 2006

What we know about people who are homeless

The Committee to End Homelessness (CEH) has done substantial research, including stakeholder input, to identify factors that create and sustain homelessness for families, adults, and youth in our community. The combinations of factors that lead to homelessness are different for every individual. The CEH has highlighted the primary factors addressed by strategies in the TYP. These include:

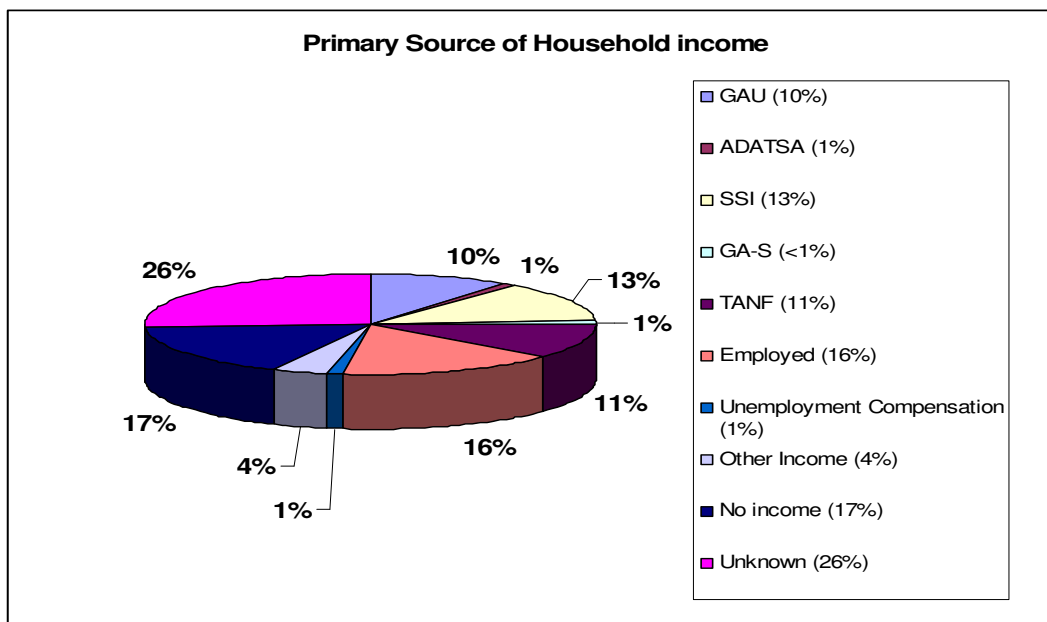
- The high cost and shortage of housing – It is nearly impossible for low income individuals and families to find affordable housing in King County. A minimum wage worker (\$7.16 per hour) would have to work 80 hours per week to afford a one-bedroom apartment at the Fair Market rent of \$729.
- Fragmented systems – There is no seamless support system for people experiencing homelessness. This fragmentation often results in a need to patch together services among different agencies targeted to different subpopulations, sometimes even within the same family. Further, people must make many calls to even begin to access services.
- Institutional discharge to homelessness – Institutions such as jails, prisons, residential treatments, or hospitals often release people adequate reentry plans for housing stabilization. Many of these need support services in addition to housing resources
- Poverty, joblessness, education, and literacy – Poverty is linked to homelessness, and lack of living wage income puts housing at risk when households must choose between housing, utilities, healthcare, childcare, and food. Local and national research shows that at least one-quarter of homeless people are employed, but not with sufficient wages to support housing stability. Lack of educational opportunities limits access to living wage jobs. The poverty of homeless individuals and families is illustrated by the Source of Income data below:



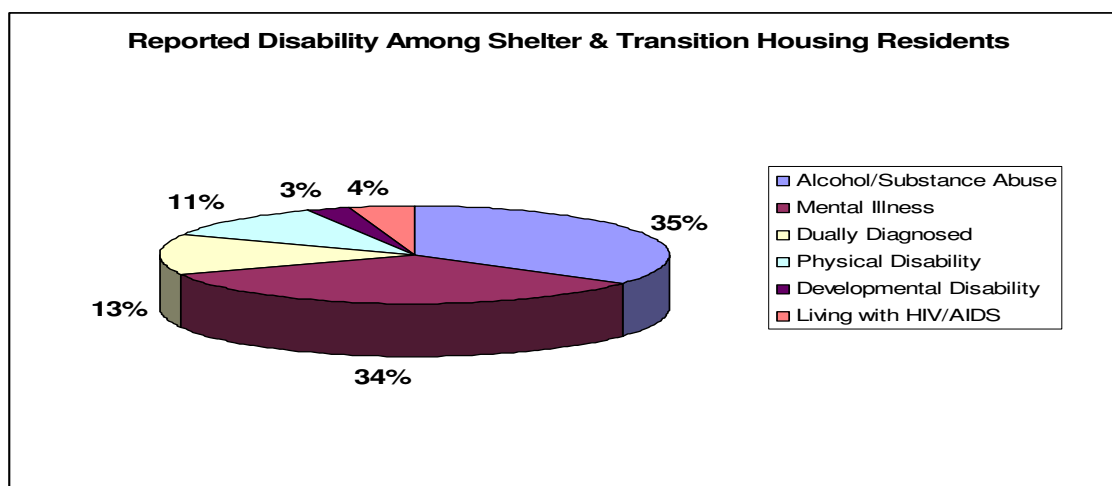
Source: Seattle-King County Coalition for the Homeless, January 2006

Nearly one quarter of households served by emergency shelter and transitional housing programs are employed, with an equal proportion having no income at all. Another way of understanding the economic circumstances for homeless people, at least those who are not on the streets, is to look at the area median income (AMI) for Seattle. Of the 3,285 households surveyed 556 or 17%

had no income, 1,622 or 49% fell within the 30% of AMI range. Only 85 or 2% of the households fell within the 50% to 80 % range. Income information was not obtained for 31% or 1,029 of the households.



- Effects of mental illness and chemical addiction – Mental illness and substance use are represented in greater proportions among homeless people than the general population. Untreated, they affect housing stability. Among those who reported having a disability in the ONC, 1,262 listed alcohol and/or substance abuse as an issue (760 of which were categorized as chronic substance abusers). Of the 1,228 persons dealing with mental illness, 585 were deemed seriously mentally ill. Under these conditions, survival without stable housing or supportive services is immeasurably complicated.



Source: Seattle-King County Coalition for the Homeless, January 2006

- Racism – As discussed above, people of color are significantly over-represented in the homeless population. It is estimated that 62% of homeless families are comprised of people of color, with African American families accounting for 43% of all homeless families in King

County. In Seattle, the median income for households comprised of people of color is significantly lower than for white households.

- Domestic violence – Nationally, studies show that up to half of homeless women with children may have experienced domestic violence prior to becoming homeless. Many homeless youth and young adults have experienced violence in their homes.
- Access to healthcare – The cost of healthcare is a significant economic barrier to housing for many low income people. Systems for health coverage can be difficult to navigate. Lack of preventive care leads to emergency room utilization for health issues. Homeless people have high rates of chronic and acute health problems.
- Legal issues – Legal barriers can lead to homelessness or the inability to secure permanent housing.

Among the diverse population of homeless *single* adults, about half meet the definition of chronically homeless. Many face system factors that prevent single adults from accessing housing: few affordable housing options for those with no or low income, eligibility criteria that screen out those with criminal or eviction histories, ineffective reentry planning from institutions such as hospitals, jails, treatment programs, fragmented systems that don't meet the multiple service needs of clients in a holistic way, discrimination due to race, gender, religion, disability, sexual identity, lack of access to the full range of specialized services, lack of peer-based support models, shortage of appropriate housing options with on-site support services, and limited employment and vocational training opportunities.

For *families*, the most common causes of homelessness include: a lack of or reduced incomes, medical, mental health, and family emergencies, and domestic violence. A vast majority have extremely low incomes. Families need housing that is not time-limited and remains affordable long term, ongoing monthly rent subsidy, job training and educational opportunities leading to living wage jobs. Many families are increasingly experiencing complex life situations.

Youth and Young Adults often have developmental and socialization needs and challenges in common, and identify more with each other than with other homeless populations.

What we know about people who are at risk of becoming homeless

While the above discussion describes people who are homeless, it does not address those who are under housed or those who are at risk of losing their housing. They come from a variety of cultural, ethnic, and linguistic backgrounds. They include young adults freshly discharged from the foster care system, middle-aged workers, as well as others who are disabled or elderly. These households live in market rate rental housing, subsidized housing, or may even own their homes. They might be your neighbors, a family member, a friend, or a veteran who served during wartime. They are people living in overcrowded or unsafe conditions, or are those who “couch surf”, stay in motels or find other temporary places to sleep at night.

Housing affordability is a major factor in determining the risk of homelessness. Housing is considered “affordable” when a low-income household pays no more than 30% of its income for housing, including utilities. Households paying more than 30% of their income on housing are increasingly at risk. The advent of welfare reform and the reduction in Temporary Assistance for Needy Families (TANF) and other public benefits removed or reduced the income cushion for vulnerable households. Many do not or cannot make sufficient incomes to live in high-cost urban

areas, such as the City of Seattle. Based on available data from the 2000 Census, 29% of Seattle's households are extremely or very low-income (0-50% of Median Family Income, or MFI). Of those households, 27,643 extremely and very low-income households (owner and renter) pay more than one-half of their income for housing costs. Even more alarming, 20,404 of these households earn less than 30% of the median family income. For further discussion of how the City and its partners are addressing housing affordability through development and rehabilitation of housing units for low income people, see the Housing section of this report on page 43.

Ready access to safety net services, therefore, is critical to meet the needs of people who are facing a housing crisis. Utilization reports from the Crisis Clinic, our community's primary information and referral resource, are an indicator of need for eviction prevention services and emergency shelter for those who have lost their housing. In calendar year 2004, 26,814 calls to the Crisis Clinic Community Information Line were received from people seeking assistance with basic needs/housing assistance, 14,358 were for housing and emergency shelter. Another 9,142 calls were reported for financial assistance for rent/mortgage, heat/lights, and water/sewer assistance. Moreover, repeated customer focus groups overwhelmingly support the importance and efficacy of these prevention efforts.

Inventory of Services and Gap Analysis

A continuum of care (a term used by the McKinney Act grant program for homeless services) includes actions and strategies for moving homeless individuals and families to stable housing and achieving maximum self-sufficiency. The City of Seattle contracts with a variety of nonprofit organizations to provide most of the housing and services. The inventory of services available in the Seattle/King County Continuum of Care includes a broad array of organizations providing services in the following areas:

Prevention – Numerous services are in place to keep individuals and families in housing, whether they have never been homeless or were formerly homeless and now live in permanent housing. These range from large programs operated by government agencies, including those providing mainstream services, and major non-profit organizations, to small help funds established and operated by neighborhood and faith-based groups. These services foster a “no wrong door” approach to identify and remedy crises as quickly as possible. Prevention services include mortgage assistance, rental assistance, utility assistance, counseling/advocacy, and legal assistance.

Funding sources include Federal Emergency Management Agency (FEMA), state Emergency Shelter Assistance Program (ESAP), state Transitional Housing Operating and Rent (THOR) administered by King County, and state Additional Requirements for Emergency Needs (AREN) programs, Low-Income Home Energy Assistance Program (LIHEAP), Emergency Housing Assistance Program (EHAP), Ryan White Title 1, HOPWA, local government allocations, United Way of King County, private donations, faith-based entities, and local thrift store receipts.

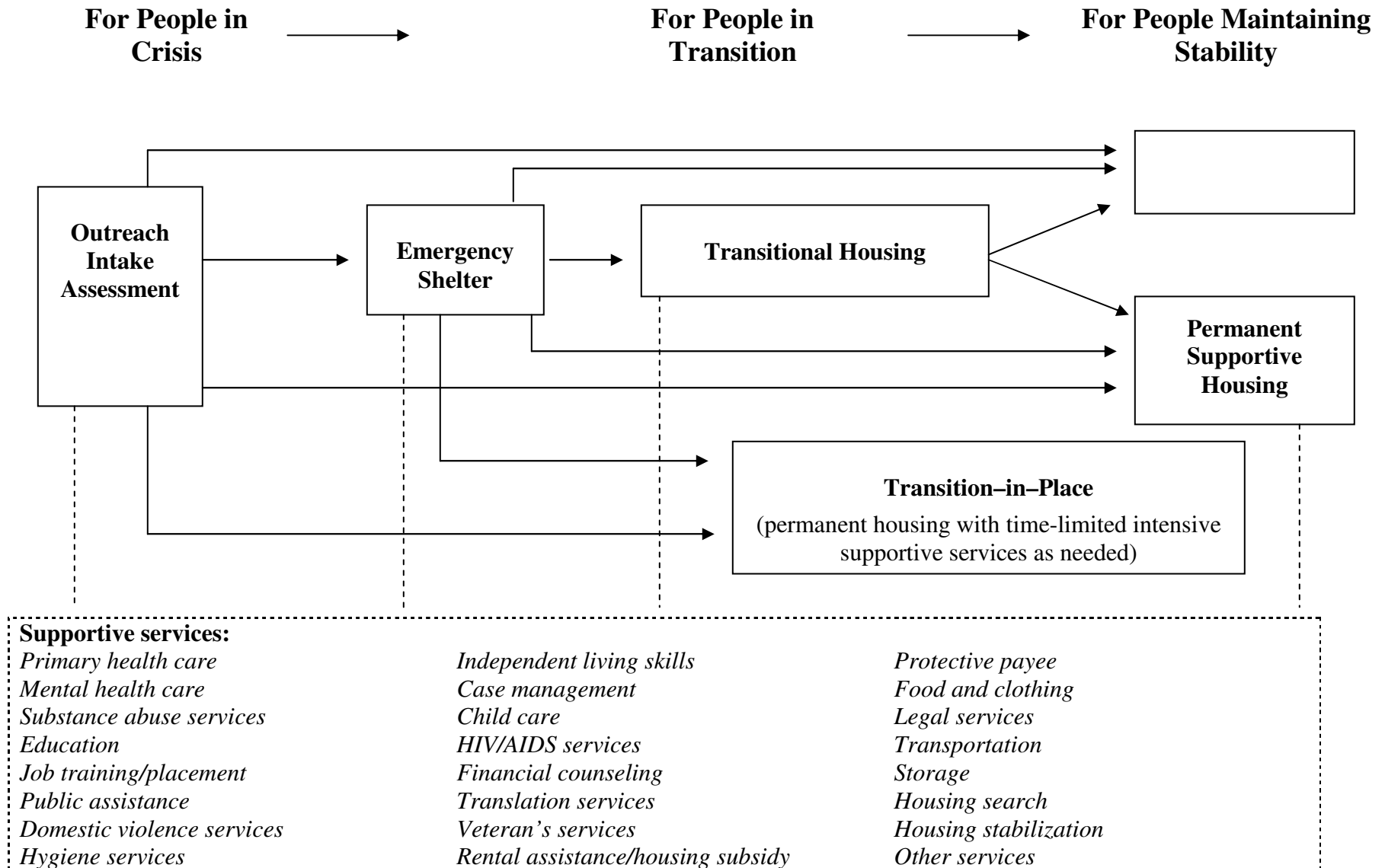
Outreach – A variety of approaches identify and engage homeless individuals in homeless assistance programs. Special efforts are targeted to helping youth and young adults, veterans, people who are seriously mentally ill, substance abusers, and people living with HIV/AIDS. These approaches include street canvassing, mobile vans, drop-in and hygiene centers, emergency shelter dispatch, encampment response programs, day labor dispatch sites, health care, special

programs in public schools, criminal justice system, and literature, websites, and presentations. Several state and federal sources support this component, coupled with McKinney, HOPWA, and General Funds. United Way and private resources are also important. Outreach services include street outreach, mobile clinic, and law enforcement.

Supportive Services – Supportive services make independent living possible for homeless and formerly homeless people who have barriers that prevent them from maintaining permanent housing. These services are often provided by staff associated with the housing provider, by mainstream systems or arranged under a memorandum of agreement between the housing provider and a service provider(s). New initiatives are underway in our community to improve the provision of supportive services. Increased collaboration among partners is enabling a more seamless linkage of homeless people to eligible public benefits. Multiple funding sources make the provision of supportive services available in our community. In addition to state, federal, United Way, and private sources, the City of Seattle allocates CDBG, ESG, HOPWA, HOME, McKinney, and General Funds to this component of the continuum. Program income is also an important resource for providers. Supportive services include case management, life skills, alcohol and drug abuse, mental health counseling, healthcare, HIV/AIDS, education, employment, child care, and transportation.

Continued improvements to our Continuum of Care are guided by the recommendations of the TYP and will bring the services inventory into alignment with TYP strategies for families, adults, and youth. Over the next several years with implementation of the TYP, the continuum should begin to reflect less of a linear relationship from intake via emergency service, through transitional programs and eventually to stable housing options. The goal of housing first should allow for stable housing options to occur at the earliest possible point in the service to homeless households.

Homelessness Continuum of Care



The TYP states numeric goals for types of housing needed by chronically homeless, single adults, families, *over the ten year life* of the plan. On an annual basis, the City develops an estimate (or gap inventory) for housing types needed by subpopulations when it completes the McKinney Act grant application:

Type of Housing and Support Needed by Homeless Subpopulations Over 10 Years

Homeless Subpopulation	Total Units Needed	Number of Units by Level of Support Services on Site*		
		Intensive	Moderate	None
<i>HUD-defined chronic homeless**</i>	2,500	1,800	700	0
<i>Other single adults</i>	4,800	1,100	2,100	1,600
Total Single Adults	7,300	2,900	2,800	1,600
Families	1,900	475	475	950
Youth/Young Adults***	300	250	0	50
Total	9,500	3,625	3,275	2,600

*In addition to on-site services where provided, all formerly homeless individuals and families will be able to access services through related systems as needed to support housing stability and quality of life. In addition, support in securing affordable and appropriate housing will be needed by many households.

**As defined by the U.S. Department of Housing and Urban Development: homeless for over a year or homeless more than four times in the previous three years and living with a disabling condition.

***It is estimated that some youth and young adults will be accommodated in temporary transitional programs or, with improvements in homelessness prevention and family reconciliation services, will return to their families.

Source: Seattle-King County Ten Year Plan 2005

The data in the following charts are requirements of the 2006 application for McKinney-Vento homelessness assistance funding. These charts identify annual unmet need, or housing gap, for Seattle and King County. For a detailed listing of all planned/funded services see Appendix B. Information regarding the methodology used to determine the McKinney Continuum of Care housing needs data is also included as Appendix C.

Continuum of Care Housing Inventory and Unmet Need Chart for Emergency Shelter

Emergency Shelter: Fundamental Components in CoC System – Housing Inventory Chart												
Provider Name	Facility Name	HMIS Part. Code	Number of Year-Round Beds in HMIS	Geo Code	Target Pop		Year-Round			Total Year-Round Beds	Other Beds	
					A	B	Fam. Units	Fam. Beds	Indiv. Beds		Seasonal	Overflow & Voucher
Inventory Under Development		Anticipated Occupancy Date										
Abused Deaf Women Advocacy Services	A Place of Our Own		June-06	531392	FC	DV	3	9		9		
Family and Adult Service Center	Family Center		March-06	531392	FC		2	11		11		
Subtotal Inventory Under Development:							5	20		20		
Unmet Need Unmet Need Totals							5	16		16		
1. Total Year-Round Individual ES Beds:			1905	4. Total Year-Round Family Beds:							765	
2. Year-Round Individual ES Beds in HMIS:			745	5. Year-Round Family ES Beds in HMIS:							229	
3. HMIS Coverage Individual ES Beds:			39%	6. HMIS Coverage Family ES Beds:							30%	

Continuum of Care Housing Inventory Chart and Unmet Need for Transitional Housing

Transitional Housing: Fundamental Components in CoC System – Housing Inventory Chart										
Provider Name	Facility Name	HMIS Part. Code	Number of Year-Round Beds in HMIS	Geo Code	Target Pop		Year-Round			Total Year-Round Beds
					A	B	Family Units	Family Beds	Individ.	
									Beds	
Inventory Under Development		Anticipated Occupancy Date								
Abused Deaf Women Advocacy Service	A Place of Our Own	January-07		531392	FC	DV	19	72		72
HRG/NW Family Center / YWCA	Genesee Housing	November-06		531392	FC	AIDS	6	24		24
HRG/YWCA	Stone Way Apartments	December-06		531392	FC		14	66		66
Interim	Nihonmachi Terrace (Main St. Family Housing)	April-06		531392	FC		5	16		16
St. Andrews Housing Group / YWCA	East Village (Rose Crest)	November-06		539033	FC		10	24		24
Vision House	Children's Village Phase II	June-07		531302	FC		8	44		44
Subtotal Inventory Under Development:							62	246	0	246
Unmet Need					Unmet Need Totals		15	42	20	62
1. Total Year-Round Individual TH Beds:		1,435	4. Total Year-Round Family Beds:							2728
2. Year-Round Individual TH Beds in HMIS:		791	5. Year-Round Family TH Beds in HMIS:							962
3. HMIS Coverage Individual TH Beds:		55%	6. HMIS Coverage Family TH Beds:							35%

Continuum of Care Housing Inventory and Unmet Need Chart for Permanent Supportive Housing

Permanent Supportive Housing*: Fundamental Components in CoC System – Housing Inventory Chart									
Inventory Under Development		Anticipated Occupancy Date							
Archdiocesan Housing Authority	Josephenum	December-06	531392	SF				15	15
DESC	415 10th	June-07						75/53	75
King County/PHG	Shelter Plus Care	May-06	539033	SMF				26 / 26	26
Plymouth Housing Group (PHG)	3rd and Blanchard	November-07	531392	SMF				74/35	74
Plymouth Housing Group (PHG)	3rd and Blanchard	November-07	531392	SMF	VETS			20/10	20
PHG	Plymouth on Stewart (2nd and Stewart)	May-06	531392	SMF				84 / 40	84
Seattle Mental Health	South King Pilot	September-06	539033	SMF				25/25	25
Subtotal Inventory Under Development:						0	0	319/189	319
Unmet Need						Unmet Need Totals:		166	530
								2,170/1,358	2,700
1. Total Year-Round Individual PH Beds:		1846	4. Total Year-Round Family Beds:					624	
2. Year-Round Individual PH Beds in HMIS:		1175	5. Year-Round Family PH Beds in HMIS:					433	
3. HMIS Coverage Individual PH Beds:		64%	6. HMIS Coverage Family PH Beds:					69%	